INFECTION PREVENTION AND CONTROL IN LAUNDARY

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Ministry of Health

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DEFINITION

Laundry in a health-care facility an area in which bed sheets and blankets, towels, personal clothing, patient apparel, uniforms, scrub suits, gowns, and drapes for surgical procedures **washing drying** and **storage**. Although contaminated textiles and fabrics in health-care facilities can be a source of substantial numbers of pathogenic microorganisms

Activities in laundry

- Collecting and receiving dirty and soiled linen from wards and other dept.
- Sorting of linen
- Removing of blood stains
- Disinfection
- Washing and Drying
- Repairing/ sewing
- Pressing/calendering and folding
- Storage
- Issue of material

CONTAMINATED TEXTILE AND FABRIC

Contaminated textiles and fabrics often contain high numbers of microorganisms from body substances, including blood, skin, stool, urine, vomitus, and other body tissues and fluids. When textiles are heavily contaminated with potentially infective body substances

CONTAMINATED TEXTILE AND FABRIC

- **they** can contain bacterial loads of 106 –108 CFU/100 cm2 of fabric.1247 Disease transmission attributed to health-care laundry has involved contaminated fabrics that were handled inappropriately (i.e., the shaking of soiled linens). Bacteria (Salmonella spp., Bacillus cereus), viruses (hepatitis B virus [HBV]), fungi (Microsporum canis), and ectoparasites (scabies) presumably have been transmitted from contaminated textiles and fabrics to workers via
- **direct** contact or
- **aerosols** of contaminated lint generated from sorting and handling contaminated textiles.

LINENS

LINENS ARE CATEGORIZED AS FOLLOWS :

Clean Linen linen that has gone through the proper laundry processing to be rendered safe to handle by staff and patient use

Dirty (non-infectious) Linen this includes all used linens, or has come into

contact with contaminated surface, i.e., floor, dirty linen, patients, equipment, etc.

Infectious Linen (Linens that are soiled with blood, body fluid or linen that are being used in the care of patient with diseases necessitating any form of isolation

precaution (not standard).

Heat Labile Linen through washing and rinsing at low temperature (e.g. 40-50 C) will remove most organisms and should be sufficient in most circumstances, particularly in domestic washers.

CONTAMINATED TEXTILES

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Contaminated textiles should be handled with minimum agitation to avoid

contamination of air, surfaces and persons.

- Clean linens are transported, handled and stored in a way that keeps them protected from

  contamination and dust.

- There is **functional separation** of clean and used linen during storage and transport.
- Linen carts used for clean and used linen are clearly identified.

PACKAGING AND STORING

- Maintain the linens in a clean state for delivery to the customer.
- Wrapped linens into fluid-resistant bundles or place bundled but unwrapped linens into

  fluid-resistant covered carts or hampers.
- Keep unwrapped linens into carts or hampers covered at all times. If the cart does not have a

  solid bottom, it must be lined with heavy plastic or impervious paper before placing clean linens

  inside.



TRANSPORTING OF CLEAN LINENS

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- The container (cart) must be covered or wrapped for protection from contamination during transport. If the container is to be used to store the textiles in hallways, it should continue to be covered so as not to expose the contents to common traffic.
- Protection of the stored textiles is recommended until the items are distributed for

  patient use.

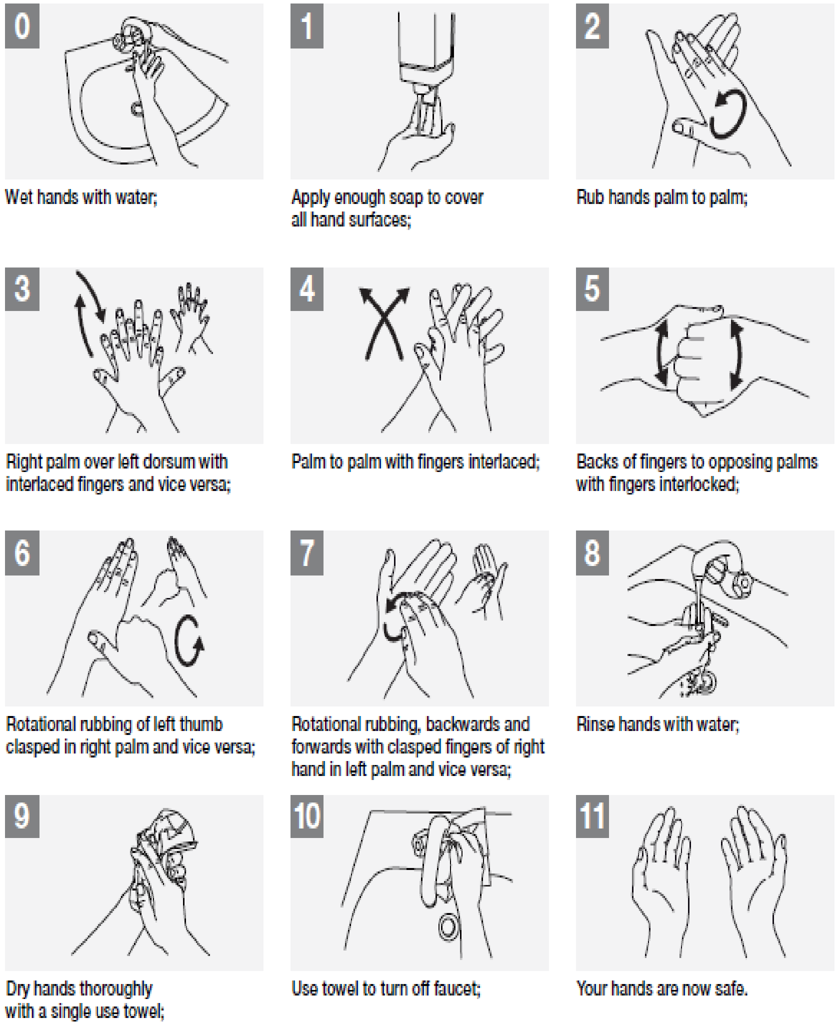




How to do Hand Wash:

Duration 40-60 seconds

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HANDLING/DISPOSAL OF CONTAMINATED ITEM

NEEDLES/ SHARPS :

a. Dispose used sharp items into an approved puncture-resistant container immediately after use, at the point of use, or as close to point of use, as possible.

b. Do not place used sharp items on any environmental surface.

3. HANDLING/DISPOSAL OF CONTAMINATED ITEMS

- Do not **RECAP** or manipulate needles using both hands because this increases the risk of injury. If recapping or manipulating the needle is deemed essential, then use either
- one-hand “scoop” technique or a mechanical device designed to hold the needle sheath.



Post injury / exposure protocol



- ✓ Don’t PANIC !!!
- ✓ Don’t squeeze the injured site
- ✓ Wash with soap and water immediately
- ✓ Report to the casualty & provide,

  (i) Full history of injury or exposure

  (ii) History of Hepatitis B immunization

  (iii) Blood for testing

3. HANDLING/DISPOSAL OF CONTAMINATED ITEMS

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2. LINEN :

- Handle and transport linen in a manner that will prevent skin/mucous membrane exposure and

  contamination of clothing or transferring microorganisms to other patients or the environment.

- Place wet/heavily soiled linen in a designated impermeable bag and close the bag securely or wrap wet linen in another piece of linen to avoid soaking of the bag.

- ***Refer to Laundry Policy & Procedure.***

3. HANDLING/DISPOSAL OF CONTAMINATED ITEMS

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3. Medical waste

- Place biomedical waste in identifiable (color-coded) bags or appropriate containers.
- Securely tie or close bags/containers and remove for appropriate disposal.

Refer to Management of Infectious Waste Policy & Procedure.



7. COUGH ETIQUETTE :

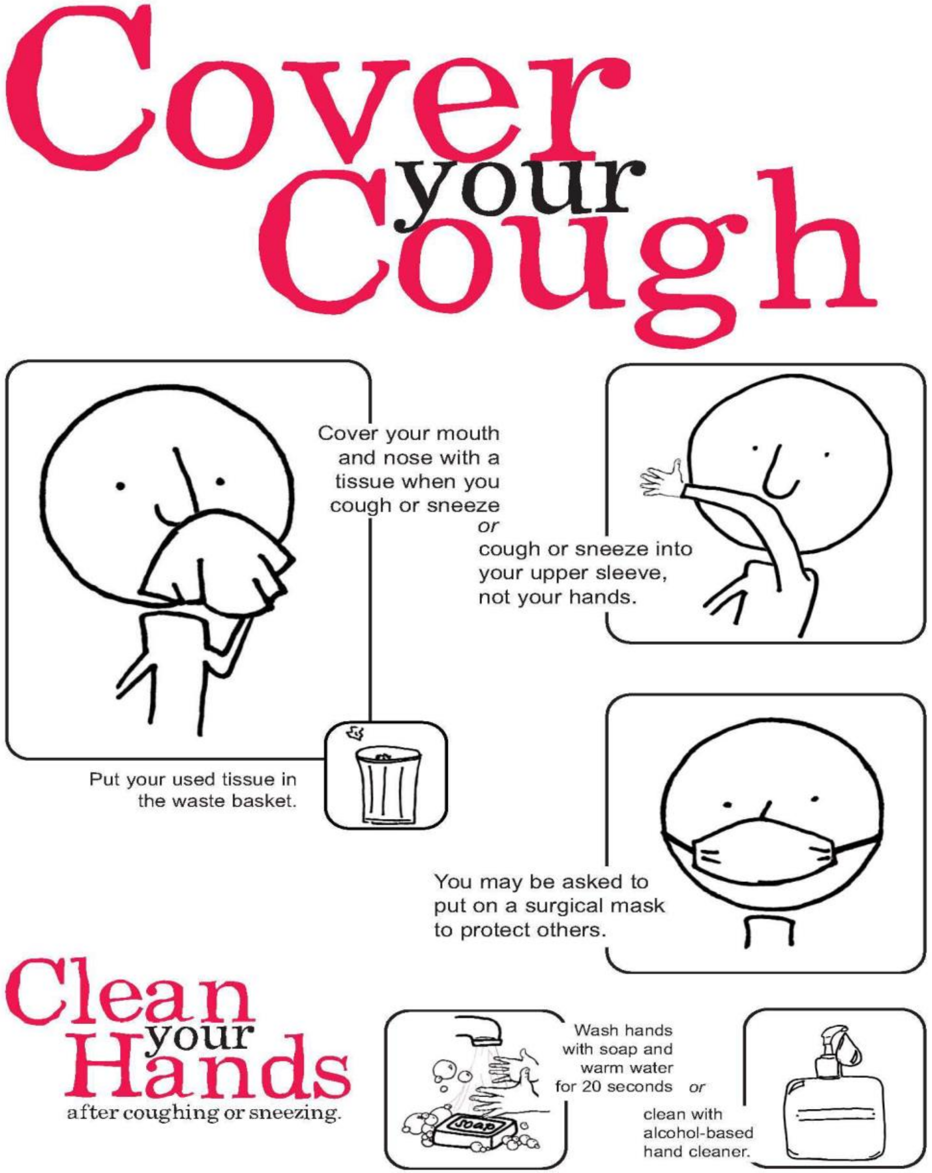
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1. Cover nose and mouth with a tissue when coughing or sneezing.

2. Dispose used tissue in the nearest waste receptacle.

3. Clean hands with soap and water or antiseptic solution or with an alcohol-based hand rub after touching respiratory secretions or handling contaminated objects.

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8. Food and Drinks at the Work Station :

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- Consumption of food and drinks in clinical areas with potential for exposure to blood or other

- infectious material or where the potential for contamination of work surfaces exist are prohibited.

- However, water bottles with protective lids, properly labeled with the employees name are allowed.


Thank
you